

# ● PRINTER RUSH ●

## (PTO ASSISTANCE)

IFW

Application : <u>09/854563</u>	Examiner : <u>Ho</u>	GAU : <u>2615</u>
From : <u>LAS</u>	Location : <u>IDC</u> FMF FDC	Date : <u>5/19/05</u>
Tracking # : <u>6094954</u>		Week Date : <u>4/18/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>11 - 8 - 2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

**[RUSH] MESSAGE:** Improper dependency:  
Original claims 2 and 3 depend on renumbered claims  
11 and 12 (original claims 12 and 13).

Thank you

**[XRUSH] RESPONSE:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INITIALS:** \_\_\_\_\_

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
 REV 10/04